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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/092,259-Conf. #9265
	Filing Date	March 7, 2002
	First Named Inventor	Chad Roberts
	Art Unit	2175
	Examiner Name	B. M. Ortiz
	Attorney Docket Number	P1139.0011/P011

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

The client has not compensated his attorneys for services rendered. The attorneys of record have attempted to contact the client on numerous occasions at the client's last know address to resolve this matter, but have received no response. This conduct on the part of the client has rendered the representation unreasonably difficult, if not impossible.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mr. Chad Roberts, PDA Verticals Corporation		
Address	18047 NE 68th Street, Suite B135		
City	Redmond	State	WA
Country	US		
Telephone	(425) 947-2936	Email	
Signature			
Name	Jon D. Grassman	Registration No.	32,699
Date	January 7, 2008	Telephone No.	(202) 420-2200

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.